

MULTIPLE DEFENDANT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO. 101563662 FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

*Art. 34*

CLAIMS

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
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46			/			
47			/			
48			/			
49			/			
50			/			
TOTAL IND.	2		2			
TOTAL DEP.	33	←	33	←		
TOTAL CLAIMS	35		35			

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51					/	
52					/	
53					/	
54					/	
55					/	
56					/	
57					/	
58					/	
59					/	
60					/	
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.					↓	
TOTAL DEP.		←		←		←
TOTAL CLAIMS						